

Frequently Asked Questions

HEAD LICE (Pediculosis)

What are HEAD LICE?

Head lice are an infestation of the scalp and hair with lice nits (eggs), larvae or adult lice. These insects feed on human blood, resulting in intense itching. Adult head lice and nits localize primarily behind the ears and just above the hairline near the nape of the neck. However, the entire scalp, eyebrows, eyelashes, and even the beard may be involved.

Who gets head lice?

Head lice can infest anyone under suitable conditions of exposure -- regardless of age, sex, race, or standards of personal hygiene. Head lice are most common in children. Head lice infestations are frequently found in the home, childcare settings, schools or institutional settings.

How are head lice transmitted?

Head lice cannot jump or fly. Spread from one person to another occurs from head-to-head contact or when a person with head lice shares personal items (such as combs, brushes, hats, sport helmets, hair accessories, scarves, jackets, sweaters, pillows, mattresses, sleeping bags, blankets, bedding, car seats, or upholstered furniture). Lice from animals do not infest humans. Animal lice may transfer to a person for a short time but do not reproduce and do not require treatment.

What are the symptoms of head lice?

Usually, the first indication of an infestation is itching or scratching the scalp where the lice feed. Scratching at the back of the head or around the ears should lead to an examination for head louse nits (eggs) on the hair. If scratching is intense, a secondary bacterial infection may result.

How soon do symptoms appear?

It may take as long as two to three weeks or longer for a person to notice the intense itching associated with head lice infestation.

How long is a person able to spread head lice?

Head lice can spread as long as lice or nits remain alive on the infested person, clothing or furniture.

What is the treatment for head lice?

Only persons with live lice and/or viable nits require treatment. Medicated shampoos or cream rinses with a pediculocide kill head lice. Over-the-counter preparations such as RID or NIX are effective. Follow the package directions when using these products.

Products containing Lindane are available only through a physician's prescription. Lindane is not recommended for infants, young children, pregnant or lactating women. If a Lindane or pyrethrin product is used, retreatment after seven to 10 days is recommended to assure that no eggs have survived. Nit combs or solutions to soften nit glue are recommended because they help remove nits from the hair. Nit removal can be the sole treatment (i.e., no medication) for infants under one year, for pregnant or nursing women, and for those individuals with eyelash or eyebrow infestations.



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What can be done to prevent the spread of head lice?

- Avoid head-to-head contact with infested individuals and their belongings (especially headgear, including sport helmets, combs and brushes, clothing, and bedding).
- Examine and treat household members, close contacts, and playmates of infested individuals once live lice or nits are discovered.
- Exclude infested persons in school and childcare until they are treated and found to be free of nits.
- Thoroughly clean household items by vacuuming upholstered furniture and carpets; machine washing washable clothing in hot (130°F) water; and drying freshly laundered clothing in hot dryer for at least 10 minutes. (If clothes are clean, just place in hot dryer). Environmental spraying is not recommended. Dry cleaning is effective for non-washable clothing and pillows.
- Wash combs and hairbrushes with a pediculocide shampoo or soak them in hot water (130°F).
- When large-scale infestations involve several families, coordinate treatment and prevention efforts.

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